



Ebola

10 Things You Should Know

A large outbreak of [Ebola](#) virus disease (or Ebola) is occurring in West Africa, specifically the countries of Guinea, Sierra Leone and Liberia. For updates on the African countries affected by this Ebola outbreak and the number Ebola deaths and cases, visit the [Centers for Disease Control and Prevention \(CDC\) Ebola website](#). Four cases of Ebola have been diagnosed in the United States—but national and County health officials say the country is not at risk for an Ebola epidemic. Ebola is a rare and deadly disease and the national and local media coverage has naturally raised some fears and concerns among some San Diego County residents. Here are 10 things you should know about Ebola and what local health officials are doing if there are cases of Ebola disease diagnosed in San Diego County.

1. What are local health officials doing to prepare against Ebola?

The risk for an Ebola outbreak or epidemic in San Diego is minimal. The County Health and Human Services Agency (HHSA) is staying current with preparation and planning guidance from the CDC and the California Department of Public Health, as well as communicating information to the local medical community. HHSA has alerted and will continue to remind the local medical community to ask patients about their recent travel history to determine if they have been to any of the affected West African countries.

2. Is San Diego prepared to stop Ebola?

HHSA has specific processes in place if a local private physician or clinic, ambulance provider, or hospital identifies a patient they think might have contracted Ebola. If a case of Ebola was diagnosed locally, the County of San Diego has well-trained staff that would investigate and locate the recent contacts of the infected individual. Close contacts of the infected individual would be placed under observation for 21 days to monitor for fever and other symptoms of the Ebola virus. These actions would help to stop the possible spread of the disease. Additional County departments, including Public Safety, Department of Environmental Health and the Office of Emergency Services, would respond as needed in the event of an Ebola case.

3. Is Ebola a risk to the general public in the U.S.?

You are not at risk for Ebola infection unless you are in direct contact with bodily fluids of someone with Ebola while they have symptoms.

To protect the U.S. public health, the [CDC is building its capacity](#) for testing and surveillance, and reinforcing infection control procedures for health workers. They are training medical responders, flight crews, and airport workers about how to report a sick passenger to the CDC and how to protect their employees and travelers.

4. Where is the current Ebola outbreak most widespread?

The countries of Guinea, Sierra Leone and Liberia—in West Africa—are where the Ebola outbreak is currently widespread, according to the World Health Organization (WHO). Additional cases were reported in the countries of Mali, Nigeria, Senegal, Spain, and the United States. Cases have also been reported in the Democratic Republic of the Congo, but the cases in the Congo are due to a different strain of the Ebola virus. The [first case confirmed in the U.S.](#) was an individual who had travelled from West Africa to Dallas, where he died of the illness. Two nurses, who cared for the man, fell ill at the same hospital, and were diagnosed with Ebola.

5. How is Ebola spread?

Ebola is spread through direct contact with blood and body fluids of a person infected with Ebola **AND** who is symptomatic. A person infected with Ebola can't spread the disease until symptoms appear. The time from exposure to when signs or symptoms of the disease appear (the incubation period) is 2 to 21 days, but the average time is 8 to 10 days. Signs of Ebola include [fever](#) (greater than or equal to 100.4°F) and symptoms like severe headache, muscle pain, vomiting, diarrhea, stomach pain, or unexplained bleeding or bruising.

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Ebola is spread through direct contact (through broken skin or through your eyes, nose, or mouth) with:

- Blood and body fluids (like urine, feces, saliva, vomit, sweat, and semen) of a person who is sick with Ebola.
- Objects (like needles) that have been contaminated with the blood or body fluids of a person sick with Ebola.
- Ebola is **NOT** spread through the air, water, or food.

6. How do I protect myself against Ebola?

There is no vaccine available for Ebola that has been approved by the U.S. Food and Drug Administration. Experimental vaccines and treatments for Ebola are under development, but they have not yet been fully tested for safety or effectiveness.

You can protect yourself from Ebola by doing the following:

- **Wash** your hands often with soap and water or use an alcohol-based hand sanitizer.
- **DON'T** touch the blood or body fluids (like urine, feces, saliva, vomit, sweat, and semen) of people who are sick.
- **DON'T** handle items that may have come in contact with a sick person's blood or body fluids, like clothes, bedding, needles, or medical equipment.

7. For what countries have travel warnings been issued?

Travel warnings have been issued for Guinea, Liberia, and Sierra Leone because of the increasing numbers of Ebola cases in these West African countries. The [CDC advises against all "nonessential" travel to these countries](#) while the Ebola outbreak is ongoing.

8. Is the U.S. screening for Ebola cases?

Five major U.S. international airports are screening patients coming from Guinea, Liberia, and Sierra Leone for fever and possible Ebola exposure, according to [CDC and the Department of Homeland Security](#).

Screening—checking for fever—is taking place at New York's JFK International Airport, Washington-Dulles, Newark, Chicago-O'Hare, and Atlanta. More than 94 percent of the travelers from West Africa arrive via these points of entry into the U.S.

As per CDC guidance, public health authorities are performing active post-arrival monitoring of travelers whose travel originates in Liberia, Sierra Leone, or Guinea. Active post-arrival monitoring means that travelers without fever or other symptoms consistent with Ebola will be followed up daily by state and local health departments for 21 days from the date of their departure from West Africa.

9. Are early Ebola symptoms similar to symptoms of other viral infections?

Early symptoms include fever, headache, body aches, cough, stomach pain, vomiting, and diarrhea. Because these could be symptoms of other diseases, it's difficult to diagnose Ebola in the earliest of stages.

More severe symptoms of Ebola can appear quickly, within a few days after onset of early symptoms. Due to internal and external bleeding, the patient's eyes may become red, and they may vomit blood, have bloody diarrhea, and suffer cardiovascular collapse and death.

10. How often is Ebola fatal?

Nearly half of the cases of Ebola viral infection in West Africa have resulted in death, based on WHO data. Although the risk of Ebola spreading in the United States is very low, CDC and its partners are taking actions to prevent this from happening.

More information on Ebola can be found at the [World Health Organization](#) and the [Centers for Disease Control and Prevention](#) websites. 🌍

